

## Application Data Sheet

### Application Information

<b>Application Type::</b>	Regular
<b>Subject Matter::</b>	Utility
<b>Suggested classification::</b>	
<b>Suggested Group Art Unit::</b>	
<b>CD-ROM or CD-R?::</b>	None
<b>Computer Readable Form (CRF)?::</b>	No
<b>Title::</b>	WAFER INSPECTION SYSTEM
<b>Attorney Docket Number::</b>	023228-0109
<b>Request for Early Publication?::</b>	No
<b>Request for Non-Publication?::</b>	No
<b>Suggested Drawing Figure::</b>	1
<b>Total Drawing Sheets::</b>	21
<b>Small Entity?::</b>	Yes
<b>Petition included?::</b>	No
<b>Secrecy Order in Parent Appl.?::</b>	No

### Applicant Information

<b>Applicant Authority Type::</b>	Inventor
<b>Primary Citizenship Country::</b>	US
<b>Status::</b>	Full Capacity
<b>Given Name::</b>	M. Brandon
<b>Family Name::</b>	Steele
<b>City of Residence::</b>	Decatur

**State or Province of** Georgia  
**Residence::**  
**Country of Residence::** US  
**Street of mailing address::** 1626 Springbrook Drive  
**City of mailing address::** Decatur  
**State or Province of mailing address::** GA  
**Postal or Zip Code of mailing address::** 30030

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** Jeffrey Alan  
**Family Name::** Hawthorne  
**City of Residence::** Decatur  
**State or Province of Residence::** Georgia  
**Country of Residence::** US  
**Street of mailing address::** 209 East Maple Street  
**City of mailing address::** Decatur  
**State or Province of mailing address::** GA  
**Postal or Zip Code of mailing address::** 30030

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** Republic of Korea  
**Status::** Full Capacity  
**Given Name::** Chunho  
**Family Name::** Kim

**City of Residence::** Duluth  
**State or Province of** Georgia  
**Residence::**  
**Country of Residence::** US  
**Street of mailing address::** 6535 Ganton Drive  
**City of mailing address::** Duluth  
**State or Province of mailing** GA  
**address::**  
**Postal or Zip Code of mailing** 30097  
**address::**

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** David C.  
**Family Name::** Sowell  
**City of Residence::** Atlanta  
**State or Province of** Georgia  
**Residence::**  
**Country of Residence::** US  
**Street of mailing address::** 704 E. Paces Ferry Road  
**City of mailing address::** Atlanta  
**State or Province of mailing** GA  
**address::**  
**Postal or Zip Code of mailing** 30305-2717  
**address::**

### **Correspondence Information**

**Correspondence Customer Number::** 27433

**E-Mail address::**

PTOMailChicago@Foley.com

**Representative Information**

<b>Representative Customer Number::</b>	27433	
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**Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
This Application	Continuation-in-part of	10/631,469	07/29/2003
10/631,469	An application claiming the benefit under 35 USC 119(e)	60/444,504	02/03/2003

**Foreign Priority Information**

<b>Country::</b>	<b>Application number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>

**Assignee Information**

**Assignee name::**

QCEPT TECHNOLOGIES, INC.